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EDITORIAL COMMENT



IS SPECIALIZING JUSTIFIABLE?

IN the *New York Medical Record* of February 20 appeared an editorial which has given rise to much one-sided newspaper criticism. Under the title, "The Rights and Duties of a Trained Nurse," it reads as follows:

"The feeling is universal that the moral plane and professional ideals of the trained nurse are similar to those of the physician. Doubts of the correctness of this conception, however, might be occasioned not infrequently by the experience of physicians in this city at the present day when they have occasion to seek the services of trained nurses from some of the more important registries. The physician who asks for a nurse is frequently obliged to undergo a cross-examination as to the circumstances of his case before one can be secured. The majority of nurses in the registries connected with the large training schools of this city are on record as being unwilling to accept employment in cases which do not come up to their requirements. For instance, Miss A. is registered against night work; Miss B. against contagious cases; Miss X. against patients where there are children in the family; Miss Y. against nervous diseases. An appeal came recently from a physician in a neighboring town to send a trained nurse to care for his very sick child. The request was refused at two of the registries in this city connected with the large training schools, although at one of them at least there was a long list of unemployed nurses. The reason given for refusal was that the nurses did not wish to leave the city just before Christmas.

"It may be said with some justice that the law of supply and demand should apply in the case of the services of trained nurses as well as of those of clerks or laborers or of the sale of commodities in general, but

among the nursing profession itself there will be a majority to repudiate indignantly the applicability of such a law to their case. They assert and believe that the trained nurse's duty is first of all to be of service in the world of suffering, and secondly to consult her own convenience. At a recent meeting of trained nurses, graduates and students, speeches by training-school superintendents and other women high in the councils of the profession showed the prevailing sentiment to be that the time was past for them to solicit favors from the medical profession. The two professions should meet on an equal basis and confer for their mutual benefit. On the same occasion, however, one woman, a teacher of nurses and of nursing, appealed with single-hearted earnestness to student nurses to keep in mind this thought: not how much they could get out of the profession of nursing the sick, but rather how much they could put into it. To give the best of themselves, with the simple old-fashioned idea of making the world a little better. What a contrast!

"At a large hostelry in this city used by graduate nurses exclusively, there has been a dearth of work and some real privation for many months past. Yet perforce must the physician often go to graduates of rural training schools, undergraduates, and untrained nurses, while scores of our most highly trained nurses remain idle. It would seem to the physician that they refuse his cases at times on unwarranted or trifling grounds. It might be well would physicians make their feeling upon this matter known to nurses generally, with the possible result that the best equipped women among the latter may not be led away from the high ideals of their profession even at the risk of occasional personal inconvenience."

We feel that this is not an unreasonable criticism, but from the point of view of the medical profession and the public is justifiable. We are fully in accord with the suggestion that the moral plane and professional ideals of the trained nurse are similar to those of the physician. We know that many nurses do pick and choose their cases in just the manner described, and that too often their refusal to respond to calls is selfish and inexcusable.

We do not know to what meeting the writer refers, but we heartily believe that the time has passed when nurses should solicit favors from physicians, but that the time has come when the two professions should meet on an equal basis and confer for their mutual benefit on all questions which do not pertain to the treatment of the patient, the nurse's relation to the physician remaining unaltered in this respect. This idea does not in any way conflict with the sentiment expressed by the teacher of nurses referred to, that nurses should keep in mind not how much they

could get out of nursing, but how much they could put into it. Every conscientious woman in the profession believes this sentiment to be the very foundation principle of a nurse's work.

First, as to the woman who specializes: as the years go on, it comes naturally to many successful nurses to drift into the kind of work that they do best or are most successful in. For instance, the nurse who takes obstetrical cases cannot do general nursing, because she has to make fixed engagements. She should not do either contagious or surgical nursing of some kinds, the reasons being obvious. Some women are interested in children and are successful in caring for them when sick; others make a bungle of that kind of work, because they haven't the temperament for it. So we might go on through the list, but, in spite of such exceptions, there is the question of the obligation to the public which nurses are, morally at least, pledged to meet. The great rank and file of our nurses do not specialize, but simply throw out certain kinds of cases that are not agreeable, and in this we think they are to be condemned.

The general practitioner is supposed to take everything that comes; the general nurse should, with limitations, do the same. There is the question of her closer contact with the patient that makes certain greater precautions in her case necessary, but such circumstances do not arise frequently enough to give rise to the feeling of dissatisfaction that prevails among many physicians.

On the other hand, we have physicians who specialize, who do not go out at night, who do not treat servants, even in the homes of their rich patrons, who do not practice in the slums, who refuse to treat any poor patient in their offices, until assured that the fee is forthcoming. Human nature is the same the world over. The selfish commercial woman who thinks first of herself, and last of others, is to be found in all the walks of life, and is not alone in the ranks of nurses. Of the hundreds of thousands of splendid men and women—doctors and nurses—who devote their lives to the alleviation of suffering, we hear very little, but of the few scores who make the sufferings of humanity their means of gaining a livelihood, we hear much.

We are of the opinion that properly organized central directories would tend to obviate some of the unsatisfactory conditions, and loyalty on the part of medical men to the women who are striving to bring nurses to a higher sense of their professional obligations, through education and state registration, would hasten the day when nurses of the selfish mercenary type would be as much under control as the laws of society permit.

INSTRUCTIONS TO DELEGATES

REORGANIZATION

THERE are a number of matters to come before the meeting at Minneapolis about which delegates will need to be clearly instructed by their associations. The first of these in importance is the question of reorganization, for which we gave a suggested outline in the December magazine. This plan means the merging of the two national societies, by which time, money, and the duplication of the work of officers would be saved. A general secretary could be employed, our forces more strongly consolidated, a larger attendance assured, which would make for better railroad rates, and there would be a broader diffusion of interest and a more valuable program.

The letters that have appeared from a number of our most influential women indicate that the idea is being received favorably. Briefly stated, the question is, Shall the two societies remain as they are, acting and working separately, coming together once in three years for a joint meeting, or shall a committee from each society be appointed to submit plans in 1910 for merging the two associations? This is a matter that should not be decided hastily, but well discussed, and referred back to the associations before formal action is taken. An official request for the instruction of delegates on the subject, from the president of the Associated Alumnae, Miss Damer, is found on another page.

THE SUFFRAGE

We understand that the question of the suffrage is again to come before the members at Minneapolis. This subject has been brought before the nurses of the country in a way that has given rise to much controversy, and has shown that great diversity of opinion exists; delegates should, therefore, be definitely instructed by their associations how to vote, in anticipation of the question again being brought forward.

CANDIDATES FOR OFFICE

In adopting the present plan of making up the ticket for the nomination of officers, it is expected that delegates shall be instructed, by the associations sending them, for whom to vote, and that they will adhere to such instructions unless granted the privilege of change by formal action of their associations. Otherwise the amount of time and labor involved in this method of nomination is wasted, and the delegate fails to honestly represent her association.

In compliance with a request which came to us after the convention

last year, we have given in the official department a list of the candidates for office in the Associated Alumnae, with comments showing from what part of the country these women come, or what offices they have previously held. This is done for the convenience of associations in instructing their delegates for whom to vote.

Of course many questions come up at every meeting about which the delegates must use their own judgment, but even so what would best meet the wishes of their home associations should be kept constantly in mind.

Members, in consenting to act as delegates, must bear in mind that the office carries with it an obligation to attend the meetings and make a detailed report of the proceedings, both official and social, to the home members.

A NEW DEPARTURE

AT St. Mary's Hospital, Brooklyn, N. Y., a change has been made in the established order of things, which appeals to us as being very sensible and worthy of being adopted universally. An address to the newly organized class was given by the visiting surgeon, Dr. Onslow Allen Gordon, in which, after reviewing briefly the history of nursing, with interesting reference to Florence Nightingale and Dorothea Dix, he explained to the members of the class their place in the hospital, giving the probationers practical advice by which they might profit during their entire period of training.

We quote a few paragraphs, and only regret that lack of space prevents our giving the address in full.

"It is doubtful if there is a more trying position in the hospital than that occupied by your superintendent; and I am going to ask you to bear that fact in mind all through your student days. She is responsible to the hospital authorities, the physicians and to the public. You can do much to lighten her burden, and I know it is not necessary to go into details as to how that can be done. All who show a desire to improve their opportunity and render service of the character required of the conscientious student, will meet with her hearty co-operation.

"No great institution can be run without certain fixed rules, which are made for the many and not for the individual. Certain restrictions and deprivations are essential to harmonious work. By bearing this fact in mind, your work will seem less arduous and your relations with all more agreeable.

"The saying that the doctor is born and not made, I believe holds good in regard to nurses; and you should bear in mind that lectures and practical training will not make of you good nurses, unless you have

entered the field with love for the work, with full realization of the responsibilities involved, and with a determination to improve every opportunity. It was Dr. Ill who once said: 'The best all-around nurse is the quick witted, conscientious and resourceful woman. No amount of training will supplant these good traits.' And I would add, that no amount of training will make a successful nurse of any one of you unless you train yourself. I mean by that, that you should train your mind, in order that you may grasp and profit by what you see and hear. Practice self-control; for a nurse who cannot control herself cannot hope to control her patient.

"I would not have you understand that the nurse is to be discouraged in all attempts at conversation, for there can be no doubt that, in moderation, it has a legitimate place with the convalescent patient. It was Dr. Van Dyke who said: 'Talkability is a virtue, and talkativeness, a vice. A talkative person is like an English sparrow, a bird that cannot sing, and will sing, and ought to be persuaded not to try to sing; but a talkable person has the gift that belongs to the wood thrush and the wren, the oriole and the white-throat and the mocking bird.' There is no place, however, in the field of nursing for the gossip or news-carrier. Some convalescing patients may be interested in having the doings of the operating room spread before them each day—the number of operations, the length of Mrs. Jones's appendix, the weight of Mrs. Smith's fibroid, who has died, and who is expected to die, how so-and-so suffered and finally died after an operation similar in character to one contemplated by the waiting patient, who the operators were, and all about their individual rating in the hospital—and many other things connected with the working of a hospital that should be considered a sacred trust. While some patients might seem interested for the time being, most would be disgusted, and all would ultimately agree that a nurse who was so newsy would be an undesirable person to enter the family. I cannot refrain from saying to you—'Learn to hold your tongue.'

"It is better for you to understand that suppuration in a wound is due to uncleanness, than to bother your heads about the name of the organism causing the disturbance. It is far better that you should understand that typhoid fever may be transmitted by carelessness in disposing of the excretions, and in the care of bed-pans, rectal tubes, dishes, etc., than to try to know all about the serum diagnoses of the disease. It is vastly more important that you should know that uncleanness, wrinkled sheets, and pressure from remaining too long in one position may be the causes of bed-sores, and that the reverse of these conditions will favor healing, than to go into the details of passive hyperæmia, exuberant and

fungous granulations, or the process of cell proliferation in the healing of ulcers. It is better that you should know where to apply a tourniquet to arrest hemorrhages, than to be able to name all the branches of a vessel, give their distribution, and describe the process of blood coagulation.

“Executive ability is a very good asset, but the ability to make your patient comfortable and contented is more to be desired. Remember that there are other methods, than giving of drugs, to relieve the tired and restless. The nurse who, from training, experience, and the exercise of common sense, is able to call into use the varied means at the command of the practical and resourceful, will always be in demand. You should see to it that the sympathetic side of your nature does not become atrophied. The sooner the nurse who is impatient and lacking in tact realizes that she has missed her calling, the better for her and all those who are unfortunate enough to require her services. Tact and courtesy should go hand in hand. They will enable you to guide your ship safely through rough waters into the peaceful and quiet harbor.

“There is one word that I would have written all over a hospital (I do not wish it understood that nurses are considered the only offenders). The word, that I deem of so much importance, is—Silence. Some people seem not to know that they are noisy—they bang doors, rattle dishes and window-shades, rustle papers, walk with a heavy tread, chatter and indulge in loud laughter—all of which has no place where there are sick, suffering, and dying people. Cultivate silence and your example will be followed by others.”

A NURSE NOT A CONTRACT LABORER

PERIODICALLY, with changes of government officials, the question comes up and is thrashed out as to whether or not a Canadian pupil in an American training school is a contract laborer. After much learned discourse, the Secretary of Commerce and Labor at Washington has decided that she is a student, in spite of the fact that she receives some compensation in money during her training, and is to be placed in the same class with the students of the United States Military Academy at West Point, who also receive a certain allowance while studying.

This is an interesting comparison for the Secretary to have made, because in no other kind of schools are the pupils governed by such military precision as in schools for nurses. That such discipline develops soldierly qualities of courage and heroism is demonstrated repeatedly, as at the wreck of the *Republic*, and the earthquake disaster at Messina.

PAPERS ON HOUSEHOLD HYGIENE

IF we are to believe the matrimonial statistics published in the October JOURNAL, and certainly our own marriage announcements confirm them, we know that each year great numbers of our readers are leaving the professional field to assume the duties and responsibilities as well as the pleasures of the home maker.

After years of hospital routine, if she had been an institution worker, or the hap-hazard life of a private nurse, if her lines have been in the path of private duty, she may find her new environment surprisingly embarrassing. It is one thing to be part of the complex machinery of a public or private establishment, but it is quite another matter to be the sole responsible domestic head of one's own home. We well remember our own sense of ignorance, when we ordered our first meal for two, after having for years calculated to a nicety the provisions for a hospital family of between three and four hundred. Our confusion was only equalled by that of our first day as a probationer in a big surgical ward.

Growing out of our own need, we have been giving Miss Hamman's papers on "Housekeeping for Two." Now we begin a series of papers by Miss McIsaac that aim to meet the needs of those contemplating housekeeping for the first time, whether as wives or just in spinster partnership.

These papers will run through the year and will cover the following heads: site, features of building, ventilation, heating, lighting, plumbing, sewage and garbage, furnishings, food, daily care of house, laundry work, causes and dissemination of disease, school children, quarantine and disinfection.

They will embody a threefold experience, that of a careful home training, long years as the executive head of a great training school, and finally the adjustment to that smaller home that we have been given a glimpse of in "A New Cranford."

NEW YORK STATE BOARD

WE had expected in this issue of the JOURNAL to have published a paper on the progress and result of state registration in New York State, prepared specially for us at this time by Jane Elizabeth Hitchcock, secretary of the board of examiners. Miss Hitchcock has delayed sending her paper until she can include a report of the last examination, held the first week in February. A much larger number of candidates came forward than is usual at the mid-year examination, 237, the number usually being greater in June; this shows the increasing value in which the examinations are held by the schools.

THE WASHINGTON BILL

THE Washington bill for state registration, which is printed on another page, passed the senate unanimously and has been signed by the governor. This is the seventeenth state to obtain a law and we congratulate the nurses of the state of Washington upon their successful legislation.

THE ADIRONDACK COTTAGE SANITARIUM

MADELINE SMITH, R.N., whose article on this topic appeared in the March JOURNAL, writes us that the nursing staff at the sanitarium has been increased by one, and the superintendent of nurses, Miss Bunce, now lives at the new medical pavilion. Miss Smith is in charge of the Infirmary.

A FILE OF JOURNALS FOR SALE

A COMPLETE file of the JOURNAL from February, 1902, until the present time, is offered by a subscriber, whose address will be given to any one wishing to procure these numbers.